

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212549674			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: The Church of the Good Shepherd Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATALIE MILLER 2980 CEDAR CREEK GRADE WINCHESTER, VA 22602</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FREDERICK COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 12/31/2012</p> <p>SCC ID NO: 07025612</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
CLASS	AUTHORIZED				
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 645 BERRYVILLE AVE</p> <p style="margin-left: 40px;">CITY/ST/ZIP: WINCHESTER, VA 22601</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: NATALIE C MILLER TITLE: TREAS/BRD MEM ADDRESS: 2980 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: NATALIE C MILLER TITLE: TREAS/BRD MEM ADDRESS: 2980 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NATALIE C MILLER TITLE: TREAS/BRD MEM ADDRESS: 2980 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: KIM WALLS TITLE: DIR/OFFCR ADDRESS: 1207 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: KIM WALLS TITLE: DIR/OFFCR ADDRESS: 1207 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KIM WALLS TITLE: DIR/OFFCR ADDRESS: 1207 CEDAR CREEK GRADE CITY/ST/ZIP/CO: WINCHESTER, VA 22602	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: Jeffrey Barbour TITLE: PRESIDENT ADDRESS: 2816 Saratoga Drive CITY/ST/ZIP/CO: Winchester, VA 22601 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Jeffrey Barbour TITLE: PRESIDENT ADDRESS: 2816 Saratoga Drive CITY/ST/ZIP/CO: Winchester, VA 22601	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jeffrey Barbour TITLE: PRESIDENT ADDRESS: 2816 Saratoga Drive CITY/ST/ZIP/CO: Winchester, VA 22601	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: Vernon Bray TITLE: DIRECTOR ADDRESS: 313 Sutton Place CITY/ST/ZIP/CO: Winchester, VA 22601 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Vernon Bray TITLE: DIRECTOR ADDRESS: 313 Sutton Place CITY/ST/ZIP/CO: Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Vernon Bray TITLE: DIRECTOR ADDRESS: 313 Sutton Place CITY/ST/ZIP/CO: Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: Bryan Stotler TITLE: DIRECTOR ADDRESS: 149 Lambden Avenue CITY/ST/ZIP/CO: Winchester, VA 22601 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Bryan Stotler TITLE: DIRECTOR ADDRESS: 149 Lambden Avenue CITY/ST/ZIP/CO: Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Bryan Stotler TITLE: DIRECTOR ADDRESS: 149 Lambden Avenue CITY/ST/ZIP/CO: Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: Robin Staubs TITLE: DIRECTOR ADDRESS: 3815 Chestnut Hill Road CITY/ST/ZIP/CO: Harpers Ferry, WV 25425 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Robin Staubs TITLE: DIRECTOR ADDRESS: 3815 Chestnut Hill Road CITY/ST/ZIP/CO: Harpers Ferry, WV 25425	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Robin Staubs TITLE: DIRECTOR ADDRESS: 3815 Chestnut Hill Road CITY/ST/ZIP/CO: Harpers Ferry, WV 25425	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Betty Hott DIRECTOR 4544 N Frederick Pike Winchester, VA 22603	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Charles See DIRECTOR Route 1 Box 415 High View, WV 26808	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Barbara Martin DIRECTOR 1805 Belmont Avenue Front Royal, VA 22630	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Steve Scothorn DIRECTOR 333 Songbird Lane Winchester, VA 22603	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeff Kerns DIRECTOR 129 Fay Street Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Bernie Witsberger DIRECTOR 13 Parkview Avenue Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Becky Bray DIRECTOR 313 Sutton Place Winchester, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Brian Hawkins DIRECTOR 501 Buckingham Drive Stephens City, VA 22655	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ NATALIE C MILLER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	NATALIE C MILLER, TREAS/BRD MEM PRINTED NAME AND CORPORATE TITLE	12/26/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			